



MasterCard® Platinum Business Card

Check Account Choice: (Only One)

Sole Owner Partnership Corporation

Credit Limit Requested
\$ _____

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT: To help the government fight the funding of terrorism and money laundering activities, Federal laws require all financial institutions to obtain, verify and record information that identifies each person who opens an Account. What this means to you: When you open an Account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

COMPANY INFORMATION

Name of Company			Tax I.D. Number	
Company Address	City	State	Zip Code	Business Phone
Type of Business			How Many Years in Business	

ISSUE BUSINESS CREDIT CARDS TO THE FOLLOWING INDIVIDUALS:

The information gathered for the individuals to receive the credit cards includes the signature at the bottom of each box.

Attach additional sheet if necessary (with signatures)

Last Name	First	Middle	Social Security Number	
Company Title		Division / Department		
Home Address	City	State	Zip	Home Phone
Signature		Limit for this Individual Card: \$		Date

Last Name	First	Middle	Social Security Number	
Company Title		Division / Department		
Home Address	City	State	Zip	Home Phone
Signature		Limit for this Individual Card: \$		Date

CREDIT INFORMATION

Attach additional sheet if necessary (with signatures)

Institution Name and Address		Branch	Loans	<input type="checkbox"/> Open	<input type="checkbox"/> Closed
Checking Account Number / Name Listed		Savings Account Number / Name Listed			

Name and Address of Trade References	Name Under Which Account Is Carried	Account Number	Balance	Monthly Payment
1.			\$	\$
2.			\$	\$
3. Institution Credit Card / Institution Name and Address			\$	\$

CONDENSED BUSINESS FINANCIAL STATEMENT

Bank reserves the right to require additional information

CURRENT ASSETS	\$	CURRENT LIABILITIES	\$
TOTAL ASSETS	\$	TOTAL LIABILITIES	\$
IMPORTANT: THE FINANCIAL STATEMENT OR AN ATTACHED STATEMENT MUST BE COMPLETED BEFORE YOUR APPLICATION CAN BE PROCESSED.		NET WORTH (Total Assets Less Liabilities)	\$

SIGNATURE(S)

PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING: This statement is submitted to obtain credit and I / We certify that all information herein is true and complete. I / We agree that inquiries may be made to verify information and that credit references or verification may be given based on inquiries from other parties. This offer is subject to the credit policies of this institution. I / We agree to be bound by the terms and conditions of the bank card agreement, a copy of which will be mailed to the applicant if this application is granted, receipt of such agreement and acceptance of such terms to be conclusively presumed by the applicant's use. If this is a joint application, the undersigned shall be jointly and severally liable for any and all credit extended from time to time.

AUTHORIZED OFFICER MUST BE ONE OF THE FOLLOWING (check one):

PRESIDENT/CHAIRMAN V.P. TREASURER PARTNER OWNER (% of Ownership _____)

X _____ **X** _____
Applicant Signature Title Date Authorizing Signature Title Date

TRANSFER OF BALANCE REQUEST

Upon approval, I wish to transfer my present balance on the credit card account(s) listed below to my new Metairie Bank & Trust credit card account. The balance transfer will be subject to finance charges the day of posting to your new account.

Credit Card Issuer _____ Account Number _____
Payment Address _____ Amount to be Transferred \$ _____
City, State, Zip _____

X _____ **X** _____
Applicant Signature Title Date Authorizing Signature Title Date

FOR INTERNAL USE ONLY

ACCOUNT NO 1		ACCOUNT NO 2	
DATE RECEIVED		RECEIVED BY	

CREDIT DISCLOSURES

Interest Rates and Interest Charges	
Annual Percentage Rate (APR) for Purchases	MasterCard® Platinum 0% intro APR for 6 months from date of account opening. After the intro APR expires, your APR will be 15.99% APR. This rate may vary based on market prime rate.
APR for Balance Transfers	0% intro APR for 6 months from date of account opening. Balance transfers received after the first 6 months of account opening, the APR will be 15.99% . This rate may vary based on market prime rate
APR for Cash Advances	17.99% This rate may vary based on market prime rate
Penalty APR and When it Applies	None
How to Avoid Paying Interest on Purchases	Your due date is at least 25 days after the close of each bill period (at least 23 days for billing periods that begin in February). We will not charge you any interest on purchases if you pay your entire balance by the due date each month.
Minimum Interest Charge	If you are charged interest, the charge will be no less than \$0.50
For Credit Card Tips from the Federal Reserve Board	To learn more about factors to consider when applying for or using a credit card, visit the website of the Consumer Financial Protection Bureau at: https://www.consumerfinance.gov/learnmore
Fees	
Annual Fee	MasterCard® Platinum None
Transaction Fees <ul style="list-style-type: none">• Balance Transfer• Cash Advances• Foreign Transaction	Up to \$5.00 or 3% of the amount transferred, whichever is greater Up to \$10.00 or 4% of the amount, whichever is greater Up to 2% each transaction in US Dollars
Penalty Fees <ul style="list-style-type: none">• Late Payment• Over-the-Credit Limit• Returned Payment	Up to \$15 if the minimum required payment is not received within 10 days after the closing date to the payment due date. NONE Up to \$25
Loss of Introductory APR:	We may end your introductory APR and apply the APR for Purchases or Balance Transfers if you become more than 60 days late in paying your bill.

How We Will Calculate Your Balance: We use a method called "average daily balance" (including new purchases). * An explanation of this method is provided in your account agreement.
Billing Rights: Information on your rights to dispute transactions and how to exercise those rights is provided in your account agreement.